MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO.

10/599717

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1"AMENDMENT		AFTER 2 MAMENDMENT	
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PTO - 1360 (REV. 04/2007)

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TOTAL IND.	0	+	0	+	0	4
TOTAL DEP.	0	+	0	+	0	+
TOTAL CLAIMS	0	II S DEPAR	0		0	

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